

Stronger together

A Provincial Framework for Action on Alcohol and Other Drug Use

October 2005



Alberta Alcohol and Drug Abuse Commission An Agency of the Government of Alberta

Table of Contents

Introduction	1
Alcohol and Other Drug Use in Alberta Alcohol Illegal Drugs Prescription Drugs	2 3
Development of a Provincial Drug Strategy Highlights of Stakeholder Consultation	
Stronger Together: The Alberta Drug Strategy	9
Purpose	9
Objectives	9
Core Elements1	0
Prevention Treatment Harm Reduction Policing and Enforcement Principles for Action	2
Comprehensive Collaborative Co-ordinated Sustainable Evidence-Based	
Priorities: Focusing Efforts	
Roles and Responsibilities	
Moving Forward1 The Alberta Drug Strategy: A Provincial Framework	
for Action on Alcohol and Other Drug Use1	
1. Enhance Support for Community Action1	
2. Respond to Use and Production of Methamphetamine2	
3. Expand Youth Treatment2	
4. Intervene With Drug-Endangered Children2	
5. Address Alcohol Use and Abuse2	
6. Increase Knowledge for Decision-Making2	2
Provincial Framework for Action on Alcohol and Other Drug Use: 2005-06 to 2008-092	24
References 2	6

Introduction

Alcohol and other drug problems affect all Albertans.⁺ They are not contained by geography, social or economic status, ethnicity, gender or age. At some point in their lives, many Albertans will experience personal problems related to substance use and abuse, and many more will face difficulties because of someone else's addiction.

Alcohol and other drug problems do not occur in isolation. They affect family and social relationships, work and academic performance, and public safety. Alcohol and other drug problems are tied to the determinants of population health—income and social status, physical and social environment, biology/genetics, education, employment and working conditions, social support networks, personal health practices and coping skills, gender, culture, healthy child development and health services. Responding to these problems involves more than dealing with presenting medical and behavioural symptoms; it also requires attention to issues like housing, employment, child rearing, and the development of social supports.

Alcohol and other drug problems are costly. They place a significant economic burden on all segments of society. Millions of dollars are spent each year to address the consequences of substance use—most of which are entirely preventable—and the money is then unavailable for other services that benefit society.

Although alcohol and other drug problems have a pervasive effect on health and well-being, they are amenable to intervention. A comprehensive and collaborative approach focusing on preventing use, minimizing harm, treating dependency and reducing the drug supply is required. The Alberta Drug Strategy responds to a call from Albertans for government leadership in directing these efforts.

The Alberta Drug Strategy lays the groundwork for a co-ordinated and community-based approach to alcohol and other drug issues in this province. It builds on the considerable work underway, and is informed by consultations to date with a variety of provincial and community stakeholders. At the core of the Alberta Drug Strategy is a commitment to collective action to reduce the harms associated with alcohol and other drug use.

Language is often of particular concern when discussing patterns of consumption, behaviours and consequences related to substance use. Throughout this document the phrase "alcohol and other drug use" and the phrase "alcohol and other drug problems" have been used in most instances. These phrases are intended to reflect the reality that substance use exists along a continuum from beneficial to harmful and that the problems associated with substance use can be acute or chronic, depending on the quantity, frequency, method, context or duration of alcohol or other drug use.

As Alberta's population becomes larger and more diverse, so do the challenges presented by alcohol and other drug use among Albertans. Understanding the nature and scope of substance use and related harm in the province is fundamental to developing a strategy that will address these challenges.

Alcohol and Other Drug Use in Alberta

As the Alberta population continues to grow and become more diverse, so do the prominence, prevalence and complexity of alcohol and other drug problems.

The use of alcohol and other drugs tends to be highest among youth and young adults, and Alberta has one of the youngest populations in Canada. Higher rates of alcohol and other drug use in the Aboriginal population are evident now, and may be linked to the rapid growth and change that is occurring in this group.

Attitudes are shifting, with fewer young people perceiving a serious risk in using illegal drugs. Perceptions are also changing among adults who increasingly rely on a variety of drugs to manage the stresses of daily life.

Illegal drugs like cannabis are more accessible and more potent. Synthetic or designer drugs like methamphetamine, GHB (gamma hydroxybutyrate) and ketamine continue to emerge on the street in cycles of surging and waning popularity.

Many prescription drugs have serious addiction liability. There is considerable potential for harmful effects when these drugs are used in excessive quantities, used contrary to medical directives, or used in combination with alcohol and/or other legal and illegal drugs.

Overall, Albertans' use of alcohol and other drugs ranks in the top third of provinces in Canada. Trends show that the prevalence of alcohol use remains high, yet has been relatively stable over the last ten years. Prevalence of use of other substances like cannabis and cocaine/crack is lower, but has increased during this same time period.

Alcohol

Increased alcohol consumption and heavy drinking in Alberta is a significant public health issue. Alcohol plays a major role in morbidity and mortality and is associated with a wide range of physical and mental health problems as well as social and economic costs.

• 80% of Albertans (15 and older) consume alcohol. Albertans drink more per capita (8.9 litres) than the Canadian average (7.9 litres).^{1,2}

- Albertans are more likely than other Canadians to report heavy alcohol consumption (22.4% vs. 20.7%), hazardous drinking (15.3% vs. 13.6%) and alcohol dependence (3.5% vs. 2.5%).^{1,3,4}
- Among Alberta youth, 56.3% of students consume alcohol and 13.0% (about 52,180 youth aged 11 to 19) drink at hazardous or harmful levels.⁵
- Albertans (9.5%) are more likely than other Canadians (8.8%) to report that they have experienced harm from their own drinking.¹
- More than one-third of Albertans (38.0%) report that they have experienced harm because of someone else's drinking, including verbal and physical abuse, and marital and family problems.¹
- Alcohol use during pregnancy can result in fetal alcohol spectrum disorder (FASD), which has enormous implications in terms of illness and disability. Estimates suggest the prevalence of fetal alcohol syndrome (FAS) is 1–3 per 1,000 live births, with higher rates in Aboriginal populations.⁶
- Without taking into account lost potential and opportunity, it is estimated that more than \$1.5 million in direct service costs (e.g., health care, special education, child and family services, income support programs, and criminal justice system) is spent on each person affected by FASD.⁶
- Alcohol was a contributing factor in 48% of reported incidents of spousal abuse in Alberta in 2003. Rates of spousal violence are higher among individuals whose partners drink heavily than among those whose partners drink moderately or not at all.⁷
- Alberta continues to have one of the highest rates of impaired driving offences among Canadian provinces and territories. In 2003, 22.3% of drivers involved in fatality collisions had consumed alcohol or were legally impaired.^{8,9}

Illegal Drugs

Alberta has a high rate of illegal drug use and its associated harms. Drug use by youth and young adults, including the use of multiple substances, has been increasing since the 1990s.

- 15.4% of Albertans (15 and older) use cannabis (marijuana or hashish) and 3.3% or less report using illegal drugs like cocaine, speed (amphetamine) or heroin.¹
- 18.4% of Albertans report harms from their use of illegal drugs, including physical health problems, negative effects on friendships, financial difficulties and problems with employment or school.¹
- An estimated 1% of Albertans are drug dependent.³

- The most popular illegal drug among Alberta students is cannabis with 27.6% reporting use and 5.8% showing signs of dependence.⁵
- About one in ten Alberta students use magic mushrooms or mescaline (10.4%), 5.6% use inhalants, 5.3% report using club drugs (ecstasy or crystal meth) and 3.9% use hallucinogens.⁵
- After a long period of stable or declining use, recent reports suggest adolescent use of solvents and inhalants is increasing, and that fewer youth see risks in experimenting with these substances.¹⁰
- Information on the prevalence of methamphetamine use in Alberta is limited. Use and abuse of this drug varies by region and study population (e.g., use is higher among street-involved youth and young adults).¹¹
- An estimated 11,000 Albertans use illegal drugs by injection, which is a primary risk factor for hepatitis C and HIV in Alberta (injection drug use accounted for 20% of newly diagnosed HIV cases in 2004).^{12,13}
- The lifetime average cost for providing treatment to each person newly infected with HIV is estimated at \$150,000. This includes physician billings, hospital stays, emergency room visits, counselling, drug costs, lab tests, and alternative therapies.¹⁴

Prescription Drugs

Indications are that prescription drug abuse has increased since the 1980s, and there is growing concern about diversion of potent medications to the black market.

- Women are more likely than men to use prescription drugs such as pain relievers, sleeping pills and tranquillizers.¹⁰
- Among Albertans 18 and older, 5% report using prescription opioids and 4% report using sedatives such as Valium[®].¹⁵
- 4.0% of Alberta students report using "uppers without a prescription" and 2.3% report using "downers without a prescription."⁵
- OxyContin® has become a popular drug of abuse in many parts of Canada and the United States. Over the past few years, prescriptions for this drug, particularly higher-strength formulations, have increased in Alberta.¹⁰

The Alberta Drug Strategy was developed through an extensive process of consultation and collaboration that included

- listening to public concern about alcohol and other drug problems
- building on efforts already underway to address these problems
- linking the strategy to local, provincial, interprovincial and national drug strategies
- enriching the strategy with the knowledge and experience of community stakeholders

Development of a Provincial Drug Strategy

In 2005, the Alberta Alcohol and Drug Abuse Commission (AADAC) led the development of the Alberta Drug Strategy. The strategy arose amidst public concern about the increased availability of new and unfamiliar drugs, rising rates of alcohol consumption and growing recognition that alcohol and other drug problems are complex. It builds on the visible momentum to address these issues, and links with the following national, provincial and community-level initiatives:

- The federal government renewed its commitment to Canada's Drug Strategy in May 2003 and stakeholder discussions across the country have focused priorities for action to address alcohol and other drug use. Between 2005 and 2008, the Drug Strategy Community Initiatives Fund will allocate over \$29 million to single- and multi-year national, provincial, territorial and community-based initiatives that address substance abuse and promote public awareness of alcohol and other drug issues. Throughout the same period, the Alcohol and Drug Treatment and Rehabilitation Program administered by the federal government will provide \$42 million in cost-shared funding for innovative and effective programs and services for people with alcohol and other drug problems.
- Other provinces in Canada have started articulating their priorities in terms of drug problems and actions, attempting to better co-ordinate strategies and responses to key issues such as concurrent disorders and methamphetamine.
- Alberta established a partnership with the Canadian Centre on Substance Abuse to support Health, Education and Enforcement in Partnership (HEP). The HEP network provides a new opportunity to exchange information and identify collaborative actions that include other provinces and territories, and national and federal organizations.
- The Alberta Government has established key provincial initiatives to respond to specific concerns and issues relating to substance use such as

fetal alcohol spectrum disorder, concurrent disorders, family violence, traffic safety (impaired driving) and methamphetamine use.

- The Provincial Advisory Committee on Illicit Drug Use (chaired by AADAC) was formed in November 2003 and is currently acting on a series of recommendations to improve Alberta's response to illicit drug use. This includes (1) enhancing strategies for information collection, management and dissemination, (2) increasing access to addiction services including prevention, youth detoxification and residential treatment, and cross-jurisdictional training, (3) exploring opportunities to improve community capacity to deal with emerging drug issues, (4) reviewing existing legislation, and (5) developing interdepartmental co-ordination in dealing with illicit drug use.
- The Non-Prescription Needle Use (NPNU) Initiative has been operational in Alberta for almost a decade. The purpose and shared goal of this initiative is to reduce the harms associated with injection drug use in relation to blood-borne infections like HIV and hepatitis. More than 30 government, professional and community agencies have formed a provincial consortium (chaired by Alberta Health and Wellness) that works together to plan, implement, evaluate and advocate for effective prevention, health promotion and community harm reduction strategies in Alberta.
- A number of community coalitions were formed in Alberta to address local drug issues, and several municipalities are in the process of developing their own community drug strategies.

The intent of the Alberta Drug Strategy is to complement these efforts, and guide further collaborative action in this province. The strategy increases opportunities for co-ordination and support at all levels and across all sectors. It enables better planning and use of resources, and establishes a common frame of reference for action on alcohol and other drug issues.

Tobacco use, problem gambling and concurrent disorders are not within the scope of the Alberta Drug Strategy. To avoid duplication of effort, the Alberta Drug Strategy links with the Alberta Tobacco Reduction Strategy, the Problem Gambling and Responsible Gambling Strategy and the provincial framework for addressing concurrent disorders.

- Alberta Tobacco Reduction Strategy (ATRS): The health and economic burden of disease related to tobacco use is well known and this has made tobacco a focus of provincial and federal initiatives. The Alberta Tobacco Reduction Strategy was implemented in 2002 to address prevention, smoking cessation and reduction of harms due to environmental tobacco smoke. AADAC provides leadership and co-ordination for this strategy on behalf of the Government of Alberta.
- *Problem and Responsible Gambling Strategy:* Gambling is a social and recreational activity that has had a considerable economic impact in

Alberta and other provinces in Canada. Problem gambling results in significant health, social and financial risk and warrants intervention. The Problem and Responsible Gambling Strategy was established in 2004. It provides direction in delivering responsible gambling initiatives in Alberta, focusing on prevention, treatment and support services, training, research, and policy development. The strategy is collaboratively managed by AADAC and the Alberta Gaming and Liquor Commission.

• *Building Capacity: A Framework for Serving Albertans Affected by Addiction and Mental Health Issues:* The needs of people with concurrent mental health and addiction concerns have historically been addressed in a fragmented manner. Substance abuse is a common reason for relapse into mental illness, and untreated mental illness is a significant factor in relapse to substance abuse. This framework recognizes that many Albertans have combined mental health and substance use problems, and that people with concurrent disorders tend to have multiple medical and social problems. The framework is intended to guide service delivery that better meets the needs of this client group. It emphasizes prevention and early intervention programs and a seamless system of treatment and community support services. AADAC is implementing the framework in consultation with health regions and other key stakeholders in Alberta.

Highlights of Stakeholder Consultation

Community consultations on a draft of the Alberta Drug Strategy were initiated by AADAC and facilitated by Alberta Community Development during May and June of 2005. These discussions were held in six locations across the province and participants were asked for their input on the strategy and their ideas for moving forward to action.

Community consultations stressed the importance of

- maintaining an approach to alcohol and other drug issues in Alberta that is comprehensive, long-term and sustainable
- developing a broad and inclusive drug strategy that offers a common frame of reference, and reflects the understanding that a range of policy and program interventions can lead to a change in the status quo
- working together to address alcohol and other drug problems, and to base program and other decisions on research evidence
- including legal substances such as alcohol and prescription drugs within the mandate of a provincial drug strategy
- ensuring provincial leadership and accountability for the strategy

Community consultations confirmed that

- the four elements of the strategy (prevention, treatment, harm reduction, policing and enforcement) are key to a balanced approach to drug problems, and provide an important link to the federal drug strategy
- a provincewide strategy offers renewed opportunity to extend support to local groups who are responding to drug issues
- community drug coalitions can benefit from enhanced co-ordination, and that provincial-level mechanisms must be in place to ensure this happens
- the strategy leaves room for communities to develop their own initiatives, based on local needs and priorities, while providing an overall structure for planning and action

The Alberta Drug Strategy reflects the contributions of all participants who provided their knowledge and experience. Consultation feedback was valuable and has been used to revise the strategy. Priorities for implementation that were identified through the consultation process are incorporated in the following sections of this document. The Alberta Drug Strategy is about working together from the community up. No single group or organization can address all the issues on its own. But by fostering a collective, community-based approach to alcohol and other drug problems, the strategy can unite a wide variety of groups at all levels under a single vision.

Stronger Together: The Alberta Drug Strategy

The Alberta Drug Strategy actively fosters a comprehensive and communitybased approach to alcohol and other drug problems by bringing together key stakeholders to find the most effective solutions. It articulates a shared purpose and outlines a set of guiding principles that enable all partners to unite in their efforts. The Alberta Drug Strategy integrates elements of other successful and collaborative models. It defines the roles and responsibilities of different stakeholders to provide an umbrella under which specific policies and programs can be developed.

Purpose

To increase the health and well-being of all Albertans by preventing and reducing harmful impacts of alcohol and other drug use.

The Alberta Drug Strategy recognizes first and foremost that alcohol and other drug use is a health issue. Substance use is shaped by personal, social and environmental factors, and collective action in addressing alcohol and other drug use is the foundation for success.

The purpose of the strategy is to reduce current harms caused by alcohol and other drug use and to prevent future problems. This encompasses a wide scope of action including demand reduction, supply reduction and harm reduction initiatives.

Objectives

The objectives of the Alberta Drug Strategy are high-level and long-term. They clarify and focus stakeholder actions, and are used to determine the success of collective efforts to address alcohol and other drug use in Alberta.

Delay the onset of alcohol and other drug use

Research indicates that the longer young people delay using alcohol or other drugs, the less likely they are to develop an addiction or to experience harmful consequences. Delaying the onset of alcohol and other drug use is a primary objective of prevention efforts within the strategy.

Decrease alcohol and other drug problems in at-risk groups

A small percentage of Albertans develop serious alcohol and other drug problems. The risk of problems developing is significantly higher in some identifiable populations and environments. A focus on anticipating, understanding and reducing the problems experienced by high-risk, vulnerable groups is therefore a central objective.

Reduce alcohol and other drug-related morbidity and mortality

The physical and mental health consequences of substance use can be acute or chronic, contributing to hospitalizations, disability, reduced productivity and loss of life—all of which have major social and economic impacts for individuals and society. An important outcome of an effective and sustained drug strategy is a decrease in the rates of injury, illness and death attributable to alcohol and other drug use.

Reduce the harms associated with alcohol and other drug use

Not all individuals who use alcohol and other drugs will experience harm, and of those that do, not all will seek to change their behaviour. Providing effective treatment to those who seek it is important, but a focus on reducing harm is critical, irrespective of a reduction in drug use. This can be accomplished through the implementation of a range of pragmatic strategies and public health interventions.

Decrease the availability of illicit drugs

Studies suggest that availability and price are factors influencing the demand for illicit drugs as well as patterns of drug consumption. The market for illicit drugs is also associated with criminal activity. Reducing the production and distribution of illegal drugs, and reducing access to legal drugs with proven potential for abuse, are part of a balanced approach to improving community health, safety and well-being.

Decrease health, social and economic costs

The substantive costs to individuals and society that result from substance use and abuse are many and varied. Strategic investment in a co-ordinated and comprehensive response to alcohol and other drug use will reduce avoidable costs to individuals, organizations and governments.

Core Elements

Four elements—prevention, treatment, harm reduction, and policing and enforcement—provide the basis for national drug strategies around the world, including Canada's Drug Strategy. These elements ensure a balanced and multi-faceted approach.

Prevention

Prevention is broadly understood to mean actions that prevent or delay the onset of alcohol and other drug use, and promote health. Prevention efforts may be directed to the population as a whole, or targeted to those people who are at increased risk of developing alcohol or other drug problems. The intent of prevention is to enhance protective factors and reduce risk factors for substance abuse. Healthy development ultimately depends on the success of prevention efforts that provide children and adolescents with meaningful opportunities to develop competence and resilience.

Treatment

While preventing alcohol and other drug use is important, it is equally important to provide treatment for people who are currently experiencing problems with alcohol or other drugs. Treatment refers to a range of interventions that assist individuals in dealing with their problems, restoring their health and preventing the recurrence of problems. Research shows that treatment should be individualized to meet client needs, and that access to a continuum of treatment services is required to effectively meet these needs.

Harm Reduction

Harm reduction recognizes that it is impossible to completely eliminate substance use, and that there is a need to minimize the harms caused by alcohol and other drug use. Harm reduction aims to improve health, social and economic outcomes for individuals and society through a range of pragmatic treatment and public health approaches. Harm reduction respects personal autonomy and supports practical interventions that assist people to address their most pressing health challenges and concerns.

Policing and Enforcement

Policing and enforcement covers a broad range of activities that are essential to reduce the production and trafficking of illegal drugs, control and regulate legal drugs, prevent crimes associated with alcohol or other drugs, and increase community health and safety. Municipal, provincial and national enforcement agencies are increasingly involved in collaborating with licensing authorities, the hospitality industry, health and social services and schools to develop initiatives that reduce alcohol and other drug problems. Policing and enforcement have an impact on the success of prevention and harm reduction initiatives, just as these efforts have an impact on criminal and regulatory activity.

11

Principles for Action

Five principles for action guide the Alberta Drug Strategy. These principles are meant to facilitate achievement of the strategy's objectives.

Comprehensive

A comprehensive approach will address harmful use of licit drugs like alcohol and pharmaceuticals, as well as illicit drugs and other substances (e.g., solvents/inhalants, non-beverage alcohol). A comprehensive approach is essential to prevent and reduce problems, ensure access to a range of treatment services, encourage research and knowledge transfer, and ensure communities are supported in responding to the needs of individuals and families.

Collaborative

No one sector either owns or can effectively deal with complex social issues in isolation. Federal, provincial and municipal governments must work together and involve non-government agencies, community stakeholders and individuals in pursuing a shared vision and implementing a range of actions to address alcohol and other drug issues. Fundamental to collaboration is the recognition that there are marginalized and stigmatized groups in society (e.g., homeless people, residents of remote communities, Aboriginal people, prisoners, immigrants) that are affected by alcohol and other drug problems but face barriers in effecting change. Collaborative actions must be inclusive of their needs and responsive to their unique circumstances.

Co-ordinated

Co-ordination among those who are already targeting drug-related harm at the federal, provincial and community level is key to addressing gaps, avoiding duplication of effort and ensuring consistency and complementary initiatives. Individuals and families affected by substance use are active participants in developing a response to alcohol and other drug issues, and their views and experiences must be respected and sought.

Sustainable

Many of the problems arising from the use and abuse of alcohol and other drugs are long-term and systemic. Dealing with these problems requires a commitment to sustained action based on measurable results.

Evidence-Based

Approaches that address drug-related harm will integrate the best available evidence from research and evaluation, and the expertise of professional, community and consumer groups. In the absence of empirical evidence, innovative approaches may be required to address emerging trends and complex situations. Commitment to the evaluation of projects and initiatives funded in support of the Alberta Drug Strategy will inform future planning and service delivery.

Priorities: Focusing Efforts

The priorities for the Alberta Drug Strategy focus stakeholder efforts and facilitate achievement of the purpose and objectives set out for the strategy. These priorities are intended to leverage experience and resources, and guide actions that may be provincial, regional or local in scope.

Leadership and Accountability

Albertans deserve effective leadership in addressing alcohol and other drug issues. Strong leadership is needed to provide strategic direction, develop healthy public policy and co-ordinate multi-sector actions.

Leadership and accountability will be demonstrated by promoting a shared purpose, engaging and sustaining participation by a variety of stakeholders, facilitating collaboration, supporting evidence-based program practices, and fostering research and knowledge transfer.

Partnerships and Community Capacity

All Albertans share responsibility for and have opportunities to participate in reducing the harms associated with alcohol and other drug use. From government and industry, to universities and police agencies, health professionals and educators, to communities, families and individuals, Albertans must work together to find solutions.

The success of the Alberta Drug Strategy depends on co-operation and involvement. Support for community-based action will be enhanced through partnerships with key stakeholders at all levels, to exchange knowledge, plan and co-ordinate initiatives and increase capacity to respond to drug issues.

Information and Research

Albertans require knowledge to make informed decisions and deal effectively with problems related to alcohol and other drug use. An emphasis on information and research is a commitment to expand the knowledge base and develop workforce capacity to deliver effective programs and services. Timely access to accurate information about alcohol and other drug trends and issues, and mechanisms to share ideas and practices from one community to another, will be improved. Priority will be placed on evaluating programs and services against best practice evidence and monitoring for effectiveness. Attention will be directed to better coordinating existing information systems and facilitating improved access to local and regional data. Partnerships with other provinces, federal agencies, universities and research institutions will be maintained to ensure that gaps in the knowledge base are addressed.

Continuum of Services

Albertans require access to a continuum of prevention, treatment and harm reduction services that address critical stages in development and important life transitions, and provide a range of options for dealing with current problems. Maintaining a comprehensive service system in Alberta is a wise investment. Preventing and treating alcohol and other drug problems benefits individuals and their families; the province's health, education and social service sectors; and the business community.

Prevention addresses the causes of problems and must be implemented over the long term. Community ownership and participation are recognized as central in delivering effective prevention programs. Coordinated prevention strategies will be developed to deliver consistent public awareness and messaging around key issues. Communities will have access to existing and new prevention resources and training materials for use in various settings including schools, health clinics and the workplace.

Harm reduction and treatment programs and services will include new initiatives such as youth detoxification and residential services, and improved case management for people with concurrent disorders. Clientcentred services will assist individuals in defining and achieving their treatment goals. An expanded communication network with community and provincial partners will help identify emerging harm reduction and treatment needs. Research and evaluation will ensure service delivery is consistent with evidence-based best practices.

Legislation and Regulation

Albertans will benefit from a legal and regulatory response to alcohol and other drugs that reduces access to substances by minors, reduces drugrelated crime and violence, and reduces substance-related mortality and morbidity.

Provincial legislation, regulations and enforcement practices will be reviewed and strengthened where necessary to help limit the supply of drugs in the province, and to support demand reduction efforts with innovative criminal justice and enforcement initiatives.

14

The Alberta Drug Strategy... at a glance

PURPOSE	To increase the health and well-being of all Albertans by preventing and reducing the harmful impacts of alcohol and other drug use.
OBJECTIVES	 Delay the onset of alcohol and other drug use
	 Decrease alcohol and other drug problems in at-risk groups
	Reduce alcohol and other drug-related morbidity and mortality
	Reduce the harms associated with alcohol and other drug use
	Decrease the availability of illicit drugs
	Decrease health, social and economic costs
CORE	PREVENTION
ELEMENTS	TREATMENT
	HARM REDUCTION
	POLICING AND ENFORCEMENT
PRINCIPLES	Comprehensive
FOR ACTION	Collaborative
	Co-ordinated
	Sustainable
	Evidence-Based
PRIORITIES	Leadership and Accountability
	Partnerships and Community Capacity
	Information and Research
	Continuum of Services
	Legislation and Regulation

Roles and Responsibilities

Action on alcohol and other drug problems happens at different levels in different ways. Roles and responsibilities vary by sector, by level of government and level of commitment, and by the resources offered by individuals and organizations.

Alberta Alcohol and Drug Abuse Commission

AADAC is mandated by the Alcohol and Drug Abuse Act to deliver and fund services for alcohol, other drug and gambling problems and to conduct related research. The Commission provides information, prevention and treatment services to all Albertans. AADAC and AADAC Funded Agencies are located in 48 Alberta communities offering assessment and outpatient counselling, detoxification and crisis services, short- and long-term residential treatment, and overnight shelter. Specialized programs are available for youth, business and industry referrals, cocaine addiction and opioid dependency treatment. AADAC also operates a 24-hour, provincewide, toll-free help line.

With more than 50 years' experience in helping Albertans, AADAC services play a key role in supporting the objectives of health in this province. AADAC will provide leadership for the Alberta Drug Strategy to sustain an effective response to alcohol and other drug issues. In this capacity, AADAC will continue to work with partners to address alcohol and other drug problems.

Provincial Government Ministries

The Alberta Government is responsible for co-ordinating a system of provincial health, addiction, enforcement, social and education services as well as cross-ministry initiatives aimed at reducing drug-related harm. For example:

- Alberta Health and Wellness sets broad policy direction and provides overall leadership for the provincial health system. The Ministry ensures all Albertans have access to quality and cost-effective health care services.
- Alberta Education has a mandate to develop school curriculum and standards for the education of young Albertans.
- Alberta Children's Services provides programs and supports for youth and their families.
- Alberta Solicitor General and Public Security ensures safety in communities through policing and crime prevention activities.
- Several other government ministries including Aboriginal Affairs and Northern Development, Justice and Attorney General, Human

Resources and Employment, and Alberta Infrastructure and Transportation are also responsible for policy initiatives and public services that directly or indirectly affect the province's ability to effectively respond to alcohol and other drug issues.

Government ministries set business goals, targets and measures, and are held accountable for reporting on these. Key government initiatives use a similar process of goal setting and reporting. Accountability for the Alberta Drug Strategy will be based on joint planning at the provincial level, with subsequent integration of performance measures into existing government business plans. Government ministries will allocate funding for drug strategy initiatives to which they have committed in their business plans.

Regional Authorities

Alberta's health regions have a significant role to play in addressing alcohol and other drug use. They are responsible for regional planning, priority setting and allocation of resources, and for the delivery and evaluation of health promotion and protection services, disease and injury prevention programs, and acute and long-term health care services. They ensure reasonable access to quality health services across the province, and are in partnership with others to identify and respond to the health needs of all Albertans.

Similarly, Alberta's child and family service regional authorities support families and communities in providing nurturing and safe environments for their children. They also have a significant role in addressing alcohol and other drug use. They are responsible for regional planning, priority setting and allocation of resources for the delivery of programs and services for children, families and community members.

Business and Industry

Alberta employers, the business sector, industry organizations and associations all have a role in responding to alcohol and other drug issues. Employers and employees are responsible for occupational health and safety. Many employers deal with workplace alcohol and other drug use by implementing comprehensive policies and by providing access to Employee Assistance Programs. The alcohol beverage industry, the hospitality sector and the pharmaceutical industry all have a public responsibility to promote safe use of their products. Industry organizations have been active partners with government and the community in developing strategies such as server intervention training and pharmacy watch programs to reduce alcohol and other drug-related harms. Professional, technical and trade associations are accountable to their members and can provide resources, training and developmental opportunities. For example, physicians and pharmacists are often a first point of contact for individuals needing information or advice, and many are involved in delivering health and safety education or providing brief treatment and support services.

Communities

The work of volunteers, community agencies and coalitions directly affects individuals and families who are experiencing alcohol or other drug problems. Communities are in the best position to identify needs, resources, concerns and gaps in service, and they play a key role in planning and implementing local initiatives. The Government of Alberta, health regions and municipalities may assist community-based strategies and initiatives through project funding, consultation, research support and training opportunities.

Individuals and Families

The role of individuals and families is critical in responding to alcohol and other drug use. Individuals require knowledge and skills to make informed decisions and manage their own health. The social support provided by families, friends and peer groups can help prevent the development of substance use problems, and it can bolster individual commitment to address problems when they arise.

Moving Forward

In order to move forward and effectively address alcohol and other drug problems in Alberta, key stakeholders must commit to a collaborative approach. Reducing demand, reducing supply and reducing the harms associated with alcohol and other drug use are equally important. Actions must demonstrate shared ownership of problems and solutions, building on lessons learned from the work already underway in the province and elsewhere in Canada. Prevention, treatment, harm reduction and enforcement efforts should be sustainable and closely linked to research and monitoring activities that result in effective progress and successful outcomes. The Alberta Drug Strategy offers the possibility and opportunity for dedicated and collaborative action in preventing and reducing alcohol and other drug-related harm. Although the action framework builds on a community-based response to drug issues and supports the strategy's current priorities, actions will change to reflect emerging issues and trends.

The Alberta Drug Strategy: A Provincial Framework for Action on Alcohol and Other Drug Use

The Alberta Drug Strategy offers new possibilities for collaborative action in preventing substance use, providing treatment, minimizing alcohol and other drug-related harms, and effectively controlling drug supplies. It presents a significant opportunity to increase partnerships and community capacity, and to optimize existing resources and expertise.

Recognizing that individual and community capacity to respond to alcohol and other drug issues is continually evolving, this framework is meant to be flexible and open to changing needs. Planned actions at the <u>provincial level</u> that reflect the priorities of the Alberta Drug Strategy and that support a community-based response to alcohol and other drug issues in Alberta include the following:

1. Enhance Support for Community Action

Local AADAC offices are currently working with more than 40 community drug coalitions across Alberta. These multi-sector groups are using a comprehensive approach to prevent and reduce the harms associated with alcohol and other drugs. Enhancing support for community drug coalitions is an important first step in co-ordinating efforts. It provides a vital mechanism for

- creating new partnerships to address areas of mutual concern
- contributing to regional, provincial and national planning efforts
- exchanging information about trends and issues, available funding, existing programs and practices, emerging issues and lessons learned from other coalitions
- bridging the gap between research and action by enhancing the capacity of community groups and service providers to use evidence to guide their decisions and actions
- advocating for ongoing research, healthy public policy, and a sustainable continuum of services

In 2004, AADAC developed the *Illicit Drug Community Response Model*. This model recognizes that community involvement is key to identifying and addressing local drug issues, and that communities require varying levels of assistance from local, regional and provincial stakeholders to do so. The model is meant to facilitate quick access by community networks to appropriate government information and other resources when responding to local drug issues. Collaborative implementation and evaluation of the community response model will contribute to a more timely and considered response to drug issues, and will provide further opportunity to strengthen community capacity.

2. Respond to Use and Production of Methamphetamine

There is an ongoing need to co-ordinate efforts across all sectors to address the use and production of methamphetamine. Collaboration at the community, provincial and interprovincial level has been underway for the last two years and will continue. Effectively responding to methamphetamine is a priority for the province, and is part of government's commitment and approach to health renewal.¹⁶

Although existing data suggest that methamphetamine use remains relatively low in the general population, there are indications of higher use in specific sub-populations and in specific regions of the province. A number of communities in Alberta have been directly affected by this trend. Coalitions have formed in these communities over the last few years to develop local strategies that specifically address methamphetamine. Alberta has also been an active partner in collaborating with other western provinces and in taking direct action at a cross-ministry level to help prevent use, reduce supply and reduce the harms associated with this drug. For example, western provinces have responded with a number of initiatives and recommendations aimed at influencing federal and provincial legislation, police enforcement and handling of clandestine labs.

All agree that methamphetamine use and production should be addressed as part of a comprehensive drug strategy. To date, Saskatchewan, British Columbia and Alberta have developed strategies that specifically address this drug problem within and across their borders. Alberta's Co-ordinated Response to Methamphetamine includes recent and planned actions by Alberta Health and Wellness, AADAC, Alberta Solicitor General and Public Security, and other government ministries and departments. It also includes actions taken by the RCMP, Alberta police services, municipalities, professional organizations and community agencies.

20

3. Expand Youth Treatment

Adolescence is a primary period of initiation to substance use; it is also a time when young people increase their consumption of alcohol and other drugs. A number of risk factors have been identified which can predispose young people to use heavily and develop health and social problems as a result. These adolescents require access to a treatment continuum that includes detoxification, outreach and crisis services, outpatient counselling, intensive day programs, residential treatment and aftercare support.

Public and service agency concerns about gaps in the current spectrum of treatment services for youth in Alberta will be addressed. A recent increase in funding has allowed AADAC to expand its system of youth services, with the opening of 24 detoxification and residential treatment beds in Calgary and Edmonton. Further expansion of detoxification and residential services in northern and southern Alberta is planned to ensure youth have voluntary access to the programs and supports they need.

The Protection of Children Abusing Drugs Act will come into force on July 1, 2006. This legislation allows a parent or guardian to apply for a court order to apprehend a child (under 18 years) who is abusing drugs, and to have the police transport the child to a protective safe house for five days. While the child is confined, AADAC will assess the child and determine whether there are reasonable grounds to believe the child is abusing alcohol or other drugs. AADAC will also treat the child for the effects of drug withdrawal (detoxification) if necessary, and will make recommendations for a post-confinement treatment plan.

It is important to help addicted youth who are difficult to engage, resistant to treatment and considered at risk of serious harm to themselves and others. Implementation of the Protection of Children Abusing Drugs Act must ensure appropriate access to treatment beds for those youth who are in transition from confinement, without compromising access to existing treatment services by youth who voluntarily commit to make changes in their lives. To fulfill the intent of this legislation, AADAC youth treatment services will be enhanced to accommodate secure residential care, assessment, treatment planning and referral.

4. Intervene With Drug-Endangered Children

Drug-endangered children have been described as those children "who suffer physical or psychological harm or neglect resulting from exposure to illegal drugs or persons under the influence of illegal drugs or exposure to dangerous environments where drugs are being manufactured."¹⁷

A growing number of U.S. jurisdictions have enacted legislation to respond to and address the problems associated with children being found in homes where drugs are produced. Expanded child abuse or endangerment statutes include drug manufacturing in the presence of a child, and in some states, separate criminal offences for exposing a child to an illegal chemical substance.

A number of states have also implemented the Drug-Endangered Children Protocol. This is meant to be an early intervention tool, based on the principles of crime prevention. Police, social services, pediatric health practitioners and dangerous goods responders all work together as a team to investigate when children are found in clandestine drug labs, marijuana grow ops or other situations where children are victims of neglect, abuse or contamination caused by drug activity. Use of this protocol and other options for intervening with drug-endangered children are being investigated by Alberta Children's Services.

5. Address Alcohol Use and Abuse

Alcohol has and continues to be the drug most frequently used in Alberta, and it is the drug most frequently associated with acute and chronic consequences. Alcohol contributes directly and indirectly to accidents and injuries; fatalities; physical and mental health problems; disabilities (including fetal alcohol spectrum disorder); social, family and financial problems; and crime. Because alcohol is a legal drug, the harms associated with alcohol use are sometimes underestimated. Young people are particularly vulnerable to the immediate negative consequences associated with drinking alcohol.

Addressing the use of alcohol is one of five priority issues identified in the current *National Framework for Action to Reduce the Harms Associated with Alcohol, Other Drugs and Substances in Canada.*¹⁸ A comprehensive and co-ordinated response to the use of alcohol in Alberta is overdue. Discussions will take place with community coalitions, and industry and provincial stakeholders to review existing surveillance data on alcohol trends and issues, research on best practices in prevention and treatment, and effective policy interventions.

6. Increase Knowledge for Decision-Making

Well-conducted research and evaluation is essential for taking action on alcohol and other drug issues. It provides the evidence needed to formulate sound policies and inform best practices, allocate resources efficiently, and support decision-making at all levels. Various types of research and evaluation are needed, including epidemiological and population health studies, biological and social science research, clinical and client outcome studies, community surveys and needs assessment, and performance measurement. There is also an ongoing need to move research findings and surveillance information from those who generate it to those who use it. Increasing knowledge and effectively transferring knowledge involves making relevant information available, accessible and applicable at all stages in planning, policy development and program delivery. The Canadian Addiction Survey (released in November 2004) has made a major contribution to providing recent data on the prevalence and problems related to alcohol and other drug use in Alberta. At the same time, gaps in information remain and there is much work that can be done to improve research and surveillance activities in Alberta. To this end, AADAC will replicate The Alberta Youth Experience Survey (TAYES) in Fall 2005. This survey provides much-needed information about alcohol and other drug use among students in grades 7 to 12. Ongoing surveys of this type are important and can assist in identifying emerging youth trends and formulating appropriate programs for young people. AADAC will also continue to work with the Canadian Centre on Substance Abuse (CCSA), Health Canada and other provincial partners to conduct and disseminate findings from national population surveys. Planning for replication of the Canadian Addiction Survey is already underway, and results from the Canadian Substance Abuse Cost Study are expected in early 2006.

Improving access to local and regional data is a priority, and options for expanding the Canadian Community Epidemiology Network on Drug Use (CCENDU) in Alberta will be explored. CCENDU is a collaborative and multidisciplinary network that facilitates the collection and dissemination of qualitative and quantitative information on drug use at the local, provincial and national level. Alberta currently has one active CCENDU site in Edmonton (coordinated by the University of Alberta, Centre for Health Promotion Studies), and this group has provided much-needed data to inform development of the Edmonton Drug Strategy.

Finally, the Alberta Drug Strategy must be supported by a provincial research agenda. The agenda will augment current research efforts; provide a systematic process for identifying research gaps and priorities; promote multi-disciplinary research that informs prevention, treatment, harm reduction and enforcement initiatives; and include monitoring and evaluation to determine whether the objectives of the strategy are being met.

Provincial Framework for Action on Alcohol and Other Drug Use: 2005-06 to 2008-09

	LEADERSHIP AND ACCOUNTABILITY	PARTNERSHIPS AND COMMUNITY CAPACITY	INFORMATION AND RESEARCH	Continuum Of Services	LEGISLATION AND REGULATION		
ACTIONS ¥							
Enhance Support for Community Action							
Assign Provincial Drug Strategy Co-ordinator(s) to support coalitions and act as a liaison to provincial committees and as the Alberta contact on key national initiatives (e.g., Health, Education and Enforcement in Partnership, Canada's Drug Strategy, National Native Alcohol and Drug Abuse Program).	N	V	٦	1			
Host provincewide community drug coalition forum to exchange knowledge and practice.	\checkmark	\checkmark	\checkmark				
Launch new project funding for community drug coalitions.	\checkmark	\checkmark		\checkmark			
AADAC, in partnership with the RCMP, to revise Two-Way Street, a drug prevention resource for parents.		\checkmark	\checkmark	\checkmark			
Develop tools and resources that support community drug coalitions.	\checkmark	\checkmark	\checkmark				
Implement and evaluate the Community Response Model.	\checkmark	\checkmark	\checkmark				
Develop a consultation plan with Aboriginal groups to explore priorities for community action on alcohol and other drugs.	\checkmark	\checkmark	\checkmark				
Respond to Use and Production of Methamphetamine							
Release Co-ordinated Alberta Response to Methamphetamine.	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		
Medical residents and pharmacy students to visit school children to inform them about methamphetamine.			4	\checkmark			
Launch provincewide public awareness focusing on methamphetamine and other drugs.	\checkmark		1				
Continue to deliver provincial school strategy with curriculum-aligned resources offering accurate and credible information on methamphetamine.			\checkmark	٦			
Legislative debate on Bill 204: Pharmacy and Drug (Methamphetamine Limiting) Amendment Act.					1		
AADAC will be incorporating specific protocols for methamphetamine in youth treatment services.		\checkmark		1			
Expand Youth Treatment							
Opening of 24 AADAC youth detoxification and residential treatment beds (Calgary and Edmonton).		V		\checkmark			
Increase access to AADAC youth detoxification and residential treatment in northern and southern Alberta (voluntary transition beds).	V	V		V			

PRIORITIES ->	LEADERSHIP AND ACCOUNTABILITY	Partnerships And Community	INFORMATION AND RESEARCH	CONTINUUM OF SERVICES	LEGISLATION AND REGULATION
ACTIONS ¥		CAPACITY			
Expand Youth Treatment					
Support implementation of Protection of Children Abusing Drugs Act by expanding treatment services for secure residential care, assessment and treatment planning.		\checkmark		1	
Provide public information about implementation of Protection of Children Abusing Drugs Act.			1		\checkmark
Intervene With Drug-Endangered Children					
Pilot testing and responder training for Drug- Endangered Children Protocol.		1		\checkmark	
Introduction of government-sponsored bill for protection of drug-endangered children.	√				1
Address Alcohol Use and Abuse	1	1	1	1	
Alberta Health and Wellness, AADAC and the University of Alberta will form a partnership to introduce a binge drinking and risk awareness campaign for young adults.	\checkmark	\checkmark	1	\checkmark	
Community and stakeholder consultation to identify current actions and common priorities for addressing alcohol use in Alberta.	1	\checkmark			
Complete review of national and international experience and best practices for a comprehensive response to alcohol issues.	\checkmark		1		
AADAC to co-chair national workshop on reducing problematic use of alcohol.	√		\checkmark		
Develop draft Alberta response to alcohol use.	√	\checkmark	\checkmark	\checkmark	\checkmark
Increase Knowledge for Decision- Making	2	-	<u>^</u>	^	
Develop a provincial research agenda to inform future actions on alcohol and other drug issues, and assess and report on drug strategy outcomes.	4	\checkmark	V	V	V
Improve capacity for environmental scanning, trend tracking and reporting at community and regional levels.	1	\checkmark	\checkmark		
Explore expansion of CCENDU (Canadian Community Epidemiology Network on Drug Use) sites in Alberta.		\checkmark	1		
Release results of The Alberta Youth Experience Survey 2005.	\checkmark	\checkmark	1	\checkmark	
Co-ordinate dissemination of results from the Canadian Substance Abuse Cost Study.	\checkmark	\checkmark	1		
Canadian Cabolance Abuse Obst Olday.					

References

- 1 Canadian Centre on Substance Abuse. (2004). *Canadian Addiction Survey (CAS): A national survey of Canadians' use of alcohol and other drugs: Highlights.* Ottawa, ON: Author.
- 2 Statistics Canada. (2005, September). *The control and sale of alcoholic beverages in Canada, 2004*. Ottawa, ON: Ministry of Industry.
- 3 Statistics Canada. (2004, June). *Canadian Community Health Survey 2003*. Available from http://www.statcan.ca
- 4 Tjepkema, M. (2004). Alcohol and illicit drug dependence. *Health Reports*, *15*(Suppl.), 9–19.
- 5 Alberta Alcohol and Drug Abuse Commission. (2003). *The Alberta Youth Experience Survey 2002.* Edmonton, AB: Author.
- 6 Health Canada. (2003). *Fetal alcohol spectrum disorder: A framework for action*. Ottawa, ON: Author.
- 7 Alberta Solicitor General. (2004). Spousal abuse database [Custom tabulation]. Edmonton, AB: Public Security Division.
- 8 Statistics Canada. (2004, October). *Canadian crime statistics* (catalogue no. 85-205-XIE). Ottawa, ON: Canadian Centre for Justice Statistics.
- 9 Alberta Transportation. (2004, September). Alberta traffic collision statistics 2003. Edmonton, AB: Driver Safety, Research and Traffic Safety Initiative.
- 10 Alberta Alcohol and Drug Abuse Commission. (2005). AADAC 2005 environmental scan. Edmonton, AB: Author.
- 11 Wild, C. (2004). *Stakeholder views of crystal meth use in Alberta*. Edmonton, AB: University of Alberta, Addiction and Mental Health Research Lab, Centre for Health Promotion Studies and Department of Public Health Sciences.
- 12 Hewitt, D. (2003, November). *Harm reduction and injection drug use: Observations for Alberta* [Internal document]. Edmonton, AB: Alberta Alcohol and Drug Abuse Commission.
- 13 Alberta Health and Wellness. (2005, April). *HIV/AIDS statistical reports to December* 31, 2004. Edmonton, AB: Disease Control and Prevention Branch.
- 14 Health Canada. (2001). *Reducing the harm associated with injection drug use in Canada*. Ottawa, ON: Author.
- 15 Wild, T. C., Curtis, M., & Pazderka-Robinson, H. (2003). Drug use in Edmonton (2001– 02): A CCENDU report. Edmonton, AB: University of Alberta, Addiction and Mental Health Research Lab, Centre for Health Promotion Studies and Department of Public Health Sciences.
- 16 Alberta Health and Wellness. (2005, August 11). Getting on with better health care. Available from http://www.health.gov.ab.ca/key/reform/pdf/AHW_WebFinal_REV.pdf
- 17 National Alliance for Drug Endangered Children. (2005). *The plight of drug endangered children* [Electronic version]. Available from http://www.nationaldec.org
- 18 Health Canada. (2005, August). Answering the call: A national framework for action to reduce the harms associated with alcohol, other drugs and substances in Canada. Ottawa, ON: Author.



Alberta Alcohol and Drug Abuse Commission An Agency of the Government of Alberta

For more information, contact your local AADAC office, call 1-866-33AADAC or visit our website www.aadac.com